

## OFFICE OF THE CITY CLERK City and County of Honolulu Honolulu Hale Honolulu, Hawaii 96813-3077 Telephone: 768-3810

## **DISCLOSURE OF FINANCIAL INTERESTS** PUBLIC DISCLOSURE FORM

	FOR CALENDAR YEAR
(PRINT	OR TYPE CLEARLY)
	Cloyd D. Burlew position/elective office City Council
	· · · · · · · · · · · · · · · · · · ·
NAME	of spouse Tara Borlev
Check th	INITIAL STATEMENT: Date on which you assumed office or began employment in this position  You must file within twenty (20) working days after this date disclosing financial interests held during the preceding calendar year.
	ANNUAL STATEMENT: You are required to file not later than January 31 of each year disclosing all financial interests held during the preceding year.
	<b>LEAVING OFFICE STATEMENT:</b> You are leaving or have left your office on and must file a statement within ten (10) working days of that date. You must disclose financial interests held during the preceding calendar year.
	<b>CANDIDATE STATEMENT:</b> You must file no later than ten (10) working days after the deadline for filing as a candidate for office disclosing interests held during the calendar year preceding the due date of the statement.

## **VERIFICATION**

I declare that I have used all reasonable diligence in preparing this form, that I have reviewed Item Nos.
through 9, and to the best of my knowledge the information provided in this form is true and correct.

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## **GENERAL INSTRUCTIONS**

All questions must be answered in regard to yourself, your spouse, and all dependent children. Use Abbreviations:

"F" for filer

"SP" for spouse

"DC" for dependent children

"JT" for joint interests of the filer and filer's spouse

All items on the form must be completed. If you have no information to disclose under a particular item, check "None". If additional space is required to complete an item, check "Additional sheets attached". Make a copy of your completed financial disclosure form for your records for future reference.

Disclosures need not be made by exact dollar amounts but may be reported by "range of value". You may indicate the value of a reportable interest by using the appropriate letter from the following codes:

A. Less than \$1,000	E. \$50,000 - \$99,999	1. \$300,000 - \$399,999	M. \$700,000 - \$799,999
B. \$1,000 - \$9,999	F. \$100,000 - \$149,999	J. \$400,000 - \$499,999	N. \$800,000 - \$899,999
C. \$10,000 - \$24,999	G. \$150,000 - \$199,999	K. \$500,000 - \$599,999	O. \$900,000 - \$999,999
D. \$25,000 <b>-</b> \$49,999	H. \$200,000 - \$299,999	L. \$600,000 - \$699,999	P. At least \$1,000,000

1. **INCOME.** Only report compensation earned for services rendered equal to \$1,000 a year or more from any employment including, but not limited to, income from the City, retirement, social security, and deferred compensation. Do not report interest, dividends, alimony, property settlements, or child support payments. Individual items of compensation that constitute a portion of the gross income of a business or profession need not be disclosed. Report income from rental property here.

MIL.	<u></u>	
None	Additional sheets attache	ed

Recipient	Employer/Source	Position/Service Rendered	When	Annual Income
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installment trans	Oo not report any debts sactions for the purchas as a home mortgage or	se of consumer goods,	Do not report debts the whatever the amount. Itudent loans.	nat arise out of retail Do report a secured
None Ac	Iditional sheets attached	d		
Person(s) Incurring Debt	Creditor	Original Loan A	Amount Amou	ınt Outstanding
F	First Founda	hian D		
beneficial intere incorporated, reg	ests having a value of julated, or licensed to ca	\$5,000 or more or equarry on business in Haw	HE STATE. Only real to 10% or more of ow aii. Do not report accour	nership of businesses nts in federal or state
trust, if the fund	or trust is disclosed un	der this item.	r individual items in a	mutuai tung or biing
□None □ A	additional sheets attach	ed		
Owner(s)	Business Name and Address	Nature of Business	Percentage of Interest	Value of Interest
	Malama Aina Organic Form	Farm	100%	\$ 12,000

4.	OWNEF business None	ses incorpora	INTERESTS Tated, regulated, litional sheets a	or licensed to c	. Only rearry on be	eport tra usiness i	ansfers of ov in Hawaii dur	wnerships ing this pa	or interests in ast year.
	Owne	ership or Inte	erest	Date of Tran	nsfer	·			
5.	positions also incl	s as trustee ude being a s in non-pro	in any busines:	s or organizatio holder in a sma	n, whethe	er or not	operated for	profit, Fig	directorships, or duciary positions report fiduciary
	Position Holder Nam			ne & Address of Business or Organization		Term of	Office	Annual Compensation	
6.	CREDIT		STS IN INSOL	VENT BUSINE	ESS worth	\$5,000	or more.		
		Address of iness Nature of Br		Business		Value			

CLIENTS PERSONALLY REPRESENTED BEFORE CITY AGENCIES. Only report representation for which you have received compensation during the preceding calendar year. Do not report representation involving ministerial matters. "Ministerial matters" do not require discretionary authority and do not need to be disclosed.  None  Additional sheets attached						
Representa	ative	Client City Age		gency	Nature of Representation	
REAL PI reasonal street ac children; "persona	rresidence.		al property owned. You are not requ or the personal map key numbe	Report the vired to report to residence of and street a	value of the property in any he tax map key number and your spouse or dependent address, identify instead as	
wner(s)	Tax Map	Key Number & Stre	eet Address	Value	Year Obtained	
REAL PI Honolulu even if it number depende instead a	ROPERTY TRAI during the prece is less than the and street addre nt children; if yo s "personal resid	NSFERRED. Only of the calendar year. Value (as in the cases for your persons to reel choose not to reel ence."	report real proper For this item, ind se of a gift). You a al residence or the port the tax map	ty transferred icate the actua are not require ne personal re key number	in the City and County of all amount of the transaction ed to report the tax map key esidence of your spouse of and street address, identify	
None						
er/Donor	Buyer/Donee	Date	Price	Тах Мар Ке	ey Number & Street Address	
	REAL Preasonal street acchildren; "personal s	REAL PROPERTY OWN reasonable manner, such street address for your personal residence."  None Additional Additi	REAL PROPERTY OWNED. Only report reasonable manner, such as assessed value. street address for your personal residence children; if you choose not to report the tax "personal residence."  Additional sheets attached  Tax Map Key Number & Street address than the value (as in the cas number and street address for your person dependent children; if you choose not to re instead as "personal residence."  Additional sheets attached	REAL PROPERTY OWNED. Only report real property owned reasonable manner, such as assessed value. You are not required address for your personal residence or the personal children; if you choose not to report the tax map key number "personal residence."  Additional sheets attached  REAL PROPERTY TRANSFERRED. Only report real proper Honolulu during the preceding calendar year. For this item, indeven if it is less than the value (as in the case of a gift). You number and street address for your personal residence or the dependent children; if you choose not to report the tax map instead as "personal residence."  Additional sheets attached	REAL PROPERTY OWNED. Only report real property owned. Report the reasonable manner, such as assessed value. You are not required to report street address for your personal residence or the personal residence of children; if you choose not to report the tax map key number and street a personal residence."  None Additional sheets attached  REAL PROPERTY TRANSFERRED. Only report real property transferred Honolulu during the preceding catendar year. For this item, indicate the actue even if it is less than the value (as in the case of a gift). You are not require number and street address for your personal residence or the personal redependent children; if you choose not to report the tax map key number instead as "personal residence."	